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FILED  
05 OCT 31 PM 1:57  
CLERK OF SUPERIOR COURT  
JANUARY 11, 2006

**COVER LETTER**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: BAY ARMATURE AND PUMP, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: CHARLES D. SNEAD  
Name (Printed or typed)

1601 N. 43<sup>RD</sup> ST.  
Address

TAMPA, FL 33605  
City, State & Zip

813-248-5980  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

ARTICLES OF INCORPORATION  
OF  
BAY ARMATURE AND PUMP, INC.

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STATE  
SECRETARY  
FLORIDA

I, the undersigned, a natural person competent to contract, hereby make, execute and acknowledge and file these Articles of Incorporation for the purpose of becoming a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be: "BAY ARMATURE AND PUMP, INC."

ARTICLE II. PRINCIPAL OFFICE

The principal place of business and mailing address is: 1601 N. 43<sup>rd</sup> Street, Tampa, FL 33605.

ARTICLE III. PURPOSE

The purpose for which the corporation is organized is: to engage in every aspect and phase of the business of manufacturing or repair of equipment and the transaction of any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

ARTICLE IV. SHARES

The number of shares of stock is: 7,500 shares of common stock having a nominal or par value of \$1.00 (one Dollar) per share.

ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS

Name	Address	Title
CHARLES D. SNEAD	5810 34 <sup>th</sup> Ave., Tampa, FL 33619	President

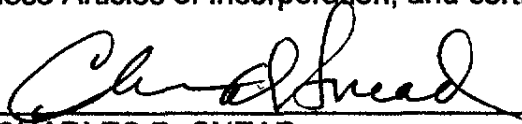
ARTICLE VI. REGISTERED AGENT

The name and Florida street address of the Registered Agent is:  
CHARLES D. SNEAD      1601 N. 43<sup>rd</sup> Street, Tampa, FL 33605

ARTICLE VII. INCORPORATOR

The name and address of the Incorporator is:  
CHARLES D. SNEAD      5810 34<sup>th</sup> Ave. S., Tampa, FL 33619

IN WITNESS WHEREOF, I, the undersigned Incorporator, have hereunto set my hand and seal this 25<sup>th</sup> day of OCTOBER, 2005, for the purpose of forming this corporation under the laws of the State of Florida and hereby make and file in the Office of the Secretary of the State of Florida, these Articles of Incorporation, and certify that the facts contained herein are true.

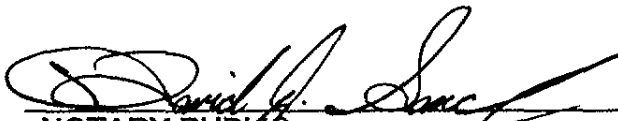
 (SEAL)  
CHARLES D. SNEAD

STATE OF FLORIDA )

COUNTY OF HILLSBOROUGH )

I HEREBY CERTIFY that on this day before me, a Notary Public authorized in the State and County above named to take acknowledgements, personally appeared CHARLES D. SNEAD, to me well known to be the person described as incorporator in and who executed the foregoing Articles of Incorporation and acknowledged before me that he signed those Articles of Incorporation.

WITNESS my hand and official seal in the County and State above named, this 25 day of October, 2005.

  
\_\_\_\_\_  
NOTARY PUBLIC  
My Commission expires: 9/26/09



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING  
IS SUBMITTED:

FIRST- -THAT BAY ARMATURE AND PUMP, INC.  
(NAME OF CORPORATION)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF  
FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF TAMPA,  
(CITY)

STATE OF FLORIDA, HAS NAMED CHARLES D. SNEAD,  
(STATE) (NAME OF THE RESIDENT AGENT)

LOCATED AT 1601 N. 43<sup>rd</sup> STREET,  
(STREET ADDRESS AND NUMBER OF BUILDING,

POST OFFICE BOX ADDRESSES ARE NOT ACCEPTABLE)  
CITY OF TAMPA 33605, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT  
(CITY)

SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE   
(CORPORATE OFFICER)

TITLE PRESIDENT  
DATE 25<sup>TH</sup> OCTOBER 2005

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE  
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I  
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO  
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER  
AND COMLETE PERFORMANCE OF MY DUTIES

SIGNATURE   
(RESIDENT AGENT)

DATE 25<sup>TH</sup> OCTOBER 2005

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TREASURY  
FLORIDA